

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address).  David Markevitch, 256163 Kaiser Gornick LLP 100 First Street San Francisco, CA 94105 TELEPHONE NO.: (415) 857-7400 ATTORNEY FOR (Name): Plaintiff		FOR COURT USE ONLY
United States District Court, Northern District of Illinois		
State of IL		
PLAINTIFF/PETITIONER: William Price, an individual	CASE NUMBER:	
DEFENDANT/RESPONDENT: Auxilium Pharmaceuticals, Inc., et al.	1:14-cv-10192	
PROOF OF SERVICE	Ref. No. or File No.:	Price - 020153

1. At the time of service I was a citizen of the United States, at least 18 years of age and not a party to this action.
2. I served copies of: Complaint and Jury Demand, Civil Cover Sheet, Summons in a Civil Case
  
3. a. Party served: CPEX PHARMACEUTICALS, INC.  
  
b. Person Served: Rose McGowan - WILMINGTON TRUST SP SERVICES - Person authorized to accept service of process
4. Address where the party was served: 1105 N. MARKET STREET, SUITE 1  
WILMINGTON, DE 19801
5. I served the party
  - a. by personal service. I personally delivered the documents listed in item 2 to the party or person authorized to receive service of process for the party (1) or (date): 4/15/2015 (2) at (time): 3:16 PM
6. Person who served papers
  - a. Name: Daniel Newcomb
  - b. Address: One Legal - 194-Marin  
504 Redwood Blvd #223  
Novato, CA 94947
  - c. Telephone number: 415-491-0606
  - d. The fee for service was: \$ 169.95

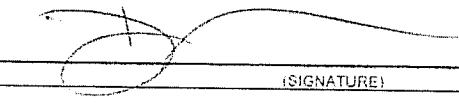
8. I declare under penalty of perjury tthat the foregoing is true and correct.

Date: 4/20/2015

Daniel Newcomb

(NAME OF PERSON WHO SERVED PAPERS)

(SIGNATURE)



PROOF OF SERVICE

OL# 1775928

AO 440 (Rev. 05/00) Summons in a Civil Action

## RETURN OF SERVICE

Service of the Summons and complaint was made by me <sup>(1)</sup>	DATE 4/20/2015
NAME OF SERVER (PRINT) Daniel Newcomb	TITLE

*Check one box below to indicate appropriate method of service*

- Served personally upon the defendant. Place where served: \_\_\_\_\_
- Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.  
Name of person with whom the summons and complaint were left: \_\_\_\_\_
- Returned unexecuted: \_\_\_\_\_
- Other (specify): Served CPEX PHARMACEUTICALS, INC., by leaving a copy of Civil Cover Sheet, Summons in a Civil Case, Complaint and Jury Demand with Rose McGowan, WILMINGTON TRUST SP SERVICES, person authorized to accept service of process, at 1105 N. Market Street, Suite 1, Wilmington, DE 19801 on 4/15/2015 at 3:16 PM.

## STATEMENT OF SERVICE FEES

TRAVEL	SERVICES	TOTAL

## DECLARATION OF SERVER

I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.

Executed on 4/20/2015  
Date

*Signature of Server* One Legal LLC  
 3516 Silverside Rd., Suite 16  
 Wilmington, DE 19810  
 415-491-0606

*Address of Server*

(1) As to who may serve a summons see Rule 4 of the Federal Rules of Civil Procedure.